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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application or Docket Number 10/750,541			ing Date 31/2003	To be Mailed
	AF	PPLICATION	AS FILE (Column 1	ALL I	ENTITY 🔲	OR		HER THAN					
FOR NUMBER FILED				ED	NUMBER EXTRA			RATE	(\$)	FEE (\$)		RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A			N/A		Manager A Address of the Control of	.	N/A	
	SEARCH FEE (37 CFR 1.16(k), (i), (i	or (m))	N/A		N/A			N/A				N/A	
	(37 CFR 1.16(o), (p),		N/A		. N/A			N/A				N/A	
	TAL CLAIMS CFR 1.16(i))		minus 20 =					x \$			OR	x \$ =	
	DEPENDENT CLAIM CFR 1.16(h))			inus 3 =	•			x \$	-			x \$ =	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	If the specification and sheets of paper, the ap is \$250 (\$125 for smal additional 50 sheets or 35 U.S.C. 41(a)(1)(G)			pplication size fee due Il entity) for each r fraction thereof. See							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))													
* If the difference in column 1 is less than zero, enter *0* in column 2.								TOTA	ı.		I	TOTAL	
APPLICATION AS AMENDED – PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY													
AMENDMENT	12/22/2006	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE	(\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.18(i))	· 22	Minus	- 22		= 0		x \$	=		OR	X \$50=	0
	Independent (37 CFR 1.16(h))	• 3	Minus	3		= 0		x \$	=		OR	X \$200=	0
	Application Size Fee (37 CFR 1.16(s))												
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))										OR		
				J 6	TOTAL ADD'L FEE			OR	TOTAL ADD'L FEE	0			
(Column 1) (Column 2) (Column 3)													
AMENDMENT	02/41	CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	(\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,16(i))	.21	Minus	· 2	2	= 8		x \$	=		OR	x \$ =	
	Independent (37 CFR 1.1f(h))	· 17	Minus	3	3	= Q		X \$	=		OR	x \$ =	
	Application Size Fee (37 CFR 1.16(s))											Ì	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))										OR		
								TOTAL ADD'L FEE	- 		OR	TOTAL ADD'L FEE	
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													

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